	PAICNI						ON HEGG)Hu	Effective December 29, 1999 9/5639/7												
		CLA		S FILED - Column 1)		SMALL TYPE	ENTITY	OR	OTHER THAN OR SMALL ENTITY												
FC	OR		NUMBE	ER FILED		NUMBER	umn 2) EXTRA		RATE	FEE	7	RATE	FEE								
B/	ASIC FEE									345.00	OR	1927 S. C. S. S.	690.00								
TC	OTAL CLAIMS			minus	20=	*			X\$ 9=		OR	X\$18=									
	DEPENDENT CL		.57	minus	3 =	*			X39=		OR	V70									
MU	JLTIPLE DEPEN	NDENT C	CLAIM PF	RESENT	-]	+130=		OR										
* if	f the difference	in colu	mn 1 is	less than z	ero, €	enter "0" in			/ TOTAL	-	L	TOTAL	Part of the								
	C	:LAIM!	S AS A	AMENDED) - P	'ART II	TRANS	, q1	tion eeded]0,,	OTHER	THAN								
		(Colu	umn 1) AIMS	Test series	(C	Column 2) HIGHEST	(Column 3)		SMALL	Same and the same and the same and	OR	SMALL E	ENTITY								
AMENDMENT A		REMA AF	AIMS AINING TER IDMENT		PR	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE								
NON	Total	<u> </u>		Minus	**		=] [X\$ 9=		OR	X\$18=									
AME	Independent	T TATIO	OF M	Minus	***		= .] [X39=		OR	X78=									
H	FIRST PRESE	NIAHGI	N OF IVIC	JLTIPLE DE	<u>}FN</u> ₽	ENT CLAIIVI] [+130=		OR	+260=									
ŀ								L	TOTAL		┪ _{╱╏} ┕	TOTAL									
			ımn 1)			Column 2)	(Column 3)		ADDIT. FEE		J ,	ADDIT. FEE									
IENDMENT B		CLA REMA AFT	AIMS AINING TER IDMENT	on Que	PR	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE								
ND	Total	*		Minus	**	,	=] [X\$ 9=		OR	X\$18=									
AME	Independent	*	OF MI	Minus	PEND		=		X39=		OR	X78=									
—	FIRST PRESE	NIAIIG	1 OF IVIO	LTIPLE DE	,END	ENT CLANVI	<u> </u>]	+130=		OR	+260=									
	•	-						L A	TOTAL ADDIT, FEE			TOTAL	<u> </u>								
		(Colu	ımn 1)			Column 2)	(Column 3)		DUII. FEL E		1	ADDIT. FEE L									
AMENDMENT C		CLA REMA	AIMS AINING TER		H N PRI	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE								
<u>8</u>	Total	*		Minus	**		=		X\$ 9=		OR	X\$18=									
AME	Independent	*		Minus	***		=		X39=		OR	X78=	<u></u>								
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							1	+130=	·			i ————								
* f	f the entry in colum	mn 1 is ler	ss than th	e entry in colu	mn 2,	write "0" in col	lumn 3.	L	TOTAL		OR L	+260=									
***	lf the "Highest Nun If the "Highest Nun The "Highest Numl	ımber Prev	viously Pai	aid For" IN THIS	IS SPA	ACE is less than	an 3, enter "3."	~	DDIT. FEE			ADDIT. FEE									
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Application or Docket Number